

CERTIFICATION REQUIREMENTS FOR DOCTORAL ROUTE TO CERTIFICATION

An individual who has earned a doctoral degree (Ph.D., Ed.D., M.D., etc.) from an institution of higher education accredited by a regional accreditation agency may apply for Missouri certification based on the major area of post-graduate study.

A certificate issued by the doctoral route to certification will be limited to the major area of post-graduate study and must be in a subject area for which there is a Missouri teaching certificate. This certificate is limited to middle school and secondary subject areas only. Elementary, special education, counselor, and administrative certificates are excluded.

The applicant can only be granted an initial professional classification certificate of license to teach. (There is no provision to receive a Career classification.) Applicants must submit the following:

☐ **Application Form**

Completed Application for Missouri Teacher's Certificate for Holder's of Doctorate Degree.

☐ **Transcripts**

Official transcript showing a doctoral degree conferred in the major area of post-graduate study and official transcripts from **ALL** other institutions attended must be provided. Please be sure your complete social security number is listed. A GPA of 2.5 on a scale for 4.0 is required in the major area and overall.

☐ **Praxis II Assessment**

Score report showing successful completion of the appropriate exit exam (Praxis II: The Principles of Learning and Teaching) as required by law.

☐ **Background Check**

A criminal background check must be completed. Please contact Identix to schedule an appointment by calling 866-522-7067 or online at <http://www.identix.com/iis/>. The current processing fee for this procedure is \$50.95. Please provide the following information when contacting Identix:

- County/District code number of the hiring school district; if not employed please use code number 999999;
- Your certification status, which will be a certified educator (E); and
- DESE's ORI number, which is MO920320Z.

Any questions regarding this portion of the application process should be directed to the Department of Elementary and Secondary Education, Conduct and Investigations Section at 573-522-8316.

☐ **Processing Fee**

Non-Missouri graduates must include the \$50 fee make payable to: Treasurer, State of Missouri.

PLEASE BE SURE THAT YOUR APPLICATION PACKET IS COMPLETE! An incomplete packet will not be processed. Mail the complete application packet to:

Educator Certification
Post Office Box 480
Jefferson City, MO 65102-0480
<http://dese.mo.gov>

You can check the status of your application on our website at
http://k12apps.dese.mo.gov/webapps/tcertsearch/tc_search1.asp



EDUCATOR CERTIFICATION
MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
DIVISION OF TEACHER QUALITY AND URBAN EDUCATION
POST OFFICE BOX 480
JEFFERSON CITY, MISSOURI 65102-0480
(573) 751-0051

APPLICATION FOR TEACHER'S CERTIFICATE FOR HOLDERS OF DOCTORATE DEGREE

A. VITAL INFORMATION					
SOCIAL SECURITY NUMBER*			FOR NON MISSOURI GRADUATES ONLY ENCLOSED IS \$50 CHECK OR MONEY ORDER MADE PAYABLE TO: TREASURER, STATE OF MISSOURI.		
CURRENT NAME (LAST, FIRST, MIDDLE INITIAL)					
ALL MAIDEN/FORMER NAMES					
STREET ADDRESS					
CITY, STATE, ZIP CODE					
DATE OF BIRTH		MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		PHONE NUMBERS H () W ()	
B. AREA OF EARNED DOCTORATE DEGREE					
Please list the area of study for earned Doctorate (i.e., biology, history, etc.):					
IMPORTANT: Official transcripts listed in Part C must be received from schools before application is considered complete.					
C. EDUCATION (If additional space is needed, please attach sheets as necessary.) List all colleges and universities, in order of attendance, at which any courses were completed. The listing must include ALL undergraduate and graduate courses and degrees.					
COLLEGE/UNIVERSITY	STATE	DATES ATTENDED		DEGREE OR CERTIFICATE AWARD DATE	MAJOR
		FROM MO/YR	TO MO/YR		
D. PROFESSIONAL CONDUCT (ALL questions must be answered)					
Please answer the following questions. If any of the questions are answered yes, please provide a separate statement of explanation.					
					YES NO
1. Have you ever been charged with, convicted or entered a plea, including a plea of <i>nolo contendere</i> , to any felony or misdemeanor whether or not sentence was imposed or suspended, except minor traffic violations? If yes, explain fully.					
2. Have you ever been denied a professional license, certificate, permit, credential, endorsement, or registration?					
3. Has your professional license (except for driver's license), certificate, permit, credential, endorsement, or registration ever been disciplined, suspended, revoked, reprimanded, restricted, curtailed or voluntarily surrendered or do you have any pending complaints before any regulatory board or agency or is there any investigation or adverse action now pending against you?					
4. Have you ever resigned, been restricted, disciplined, or discharged from any position, including the armed forces, while under suspicion of having engaged in criminal, immoral, unethical behavior or unprofessional conduct, or are you under investigation for any such charge?					
*View the Social Security Number Disclosure Notice at: http://www.dese.mo.gov/schoollaw/freqaskques/SSN_Disclosure.pdf					
E. SWORN AFFIDAVIT					
I, the below named applicant, hereby affirm under penalties of perjury that I am the applicant referred to in the preceding application for a certificate of license to teach in the state of Missouri, and that all statements and enclosures are true and accurate to the best of my knowledge, information and belief. I understand that any misrepresentation of facts may result in the denial or revocation of the requested certificate(s). I submit for consideration this application as required by the Missouri law governing the practice of teaching subject to the rules and regulations of the Missouri Department of Elementary and Secondary Education and the Missouri State Board of Education. I subscribe and agree to abide by all applicable laws and rules regarding the practice of teaching. I understand that the Missouri Department of Elementary and Secondary Education may require further information or evidence that it deems reasonable and proper. Furthermore, I voluntarily consent to a thorough investigation of my present and past employment and other activities for the purpose of verifying my qualifications. In addition, I grant permission to access any court, FBI, or police records related to arrests and convictions related to good moral character or personal fitness pertinent to my certification, and to probation or parole records as well.					
APPLICANT'S SIGNATURE				DATE	
The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. Inquiries related to Department programs may be directed to the Jefferson State Office Building, Title IX Coordinator, 205 Jefferson Street, Jefferson City, Missouri 65102-0480; telephone number 573-751-4581.					
PLEASE RETURN THIS FORM TO: EDUCATOR CERTIFICATION, POST OFFICE BOX 480, JEFFERSON CITY, MO 65102-0480 ORIGINAL SIGNATURE REQUIRED – NO FAXES OR PHOTOCOPIES! http://dese.mo.gov					